

Food Establishment Inspection Report

Score: 96

Establishment Name: HERITAGE WOODS

Establishment ID: 3034010169

Location Address: 3812 FORRESTGATE DR

☒ Inspection ☐ Re-Inspection

City: WINSTON-SALEM

State: NC

Date: 06 / 19 / 2018 Status Code: A

Zip: 27103

County: 34 Forsyth

Time In: 10 : 00 ☒ am ☐ pm Time Out: 11 : 50 ☒ am ☐ pm

Permittee: KISCO RETIREMENT, INC

Total Time: 1 hr 50 minutes

Telephone: (760) 768-2011

Category #: IV

Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: Nursing Home

Water Supply: ☒ Municipal/Community ☐ On-Site Supply

No. of Risk Factor/Intervention Violations: 1

No. of Repeat Risk Factor/Intervention Violations: 0

Foodborne Illness Risk Factors and Public Health Interventions										
Risk factors: Contributing factors that increase the chance of developing foodborne illness.										
Public Health Interventions: Control measures to prevent foodborne illness or injury.										
IN	OUT	N/A	N/O	Compliance Status			OUT	CDI	R	VR
Supervision .2652										
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties			<u>2</u>	<u>0</u>	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health .2652										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653										
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656										
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed			<u>4</u>	<u>2</u>	<u>0</u>	<input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Approved Source .2653, .2655										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			<u>3</u>	<u>13</u>	<u>0</u>	<input checked="" type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Consumer Advisory .2653										
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Highly Susceptible Populations .2653										
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized foods used; prohibited foods not offered			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Conformance with Approved Procedures .2653, .2654, .2658										
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>

Good Retail Practices										
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.										
IN	OUT	N/A	N/O	Compliance Status			OUT	CDI	R	VR
Safe Food and Water .2653, .2655, .2658										
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Food Temperature Control .2653, .2654										
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Food Identification .2653										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657										
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654										
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663										
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used			<input checked="" type="checkbox"/>	<u>1</u>	<u>0</u>	<input checked="" type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			<u>1</u>	<u>03</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Physical Facilities .2654, .2655, .2656										
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			<u>2</u>	<input checked="" type="checkbox"/>	<u>0</u>	<input checked="" type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<input checked="" type="checkbox"/>	<u>03</u>	<u>0</u>	<input checked="" type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Total Deductions:										4



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Off



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Location Address: 3812 FORRESTGATE DR

City: WINSTON-SALEM State: NC

County: 34 Forsyth Zip: 27103

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Water Supply: ☒ Municipal/Community ☐ On-Site System

Permittee: KISCO RETIREMENT, INC

Telephone: (760) 768-2011

Establishment ID: 3034010169

☒ Inspection ☐ Re-Inspection Date: 06/19/2018

Comment Addendum Attached? ☐ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: BURDETTE@KISCOSL.COM

Email 2:

Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding will change to 41 degrees

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
baked chicken	upright hot hold	174	tomatoes	walk in	43			
corn	upright hot hold	175	final cook	chicken	201			
baked	upright hot hold	174	final cook	mixed veggies	192			
ham	upright cold hold	41	sanitizer (qac)	three comp sink (ppm)	300			
tomatoes	upright cold hold	39	hot plate temp	dish machine	161			
ham	walk in	42	hot water	three comp sink	120			
turkey	walk in	42	Gerald C	9/17/18	0			
mixed veggies	walk in	44						

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

- 14 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - P Employee placed plastic bin on ground to fill with ice for soda machine. Utensils used for food handling and contact must be kept free of potential contamination and must be kept clean at all times. Employees must utilize near by table, utility cart, or other clean means to keep bins for ice off the ground. CDI: Bin cleaned and sanitized during inspection.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C REPEAT: Bottom shelf of green wire shelving in walk in freezer is broken off from its support mounts. Replace damaged shelf. / Metal plate has gaps and one plate is missing from the front of the three comp sink. Replace and reseal these plates to cover gaps between sink basins. / Condensation Ice build up on all surfaces of the walk in freezer and ice build up where it is dripping from fan unit. Repair to stop leaking of ice and water, cover drain line with pvc jacketing to divert potential leaks and allow for easy cleaning of the drain line and have unit evaluated for source of condensation build up and repair accordingly. / Multiple colored cutting boards are worn down with fibrous surfaces with deep cuts, replace the damaged cutting boards. Replace any cutting boards that have deep gouges or become absorbent due to cutting damage. / Wire shelves in upright hot hold unit is wearing down and chipping, repair or replace damaged shelves./ Thermometer
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Cleaning needed where can opener mount attaches to prep table as food debris is accumulating in gaps under the can opener. Clean and seal where the mount attaches to prevent further build up. Non food contact surfaces shall be kept clean. 0 pts

Lock
Text



Person in Charge (Print & Sign): Butch First Last Jenkins

Regulatory Authority (Print & Sign): Joseph First Last Chrobak

REHS ID: 2450 - Chrobak, Joseph

Verification Required Date: 06 / 29 / 2018

REHS Contact Phone Number: (336) 703 - 3164



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- 49 5-202.13 Backflow Prevention, Air Gap - P Sprayer for dish machine scrap sink has a new hose that is too long and is allowing the sprayer to sit inside the scrap sink basin with excessive slack on the hose. Sources of potential cross connections causing backsiphonage into the water supply must be prevented. An air gap must be provided. Replace the hose with a shorter one or supply a larger support spring to keep sprayer head at least one inch above the rim of the drainboard. VR: Verification of change to sink set up required no later than 6/29/2018. Contact Joseph Chrobak at Chrobajb@forsyth.cc or (336) 703-3164 for verification.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C REPEAT: Grouting worn in multiple areas of the kitchen. Continue repair work on grout to fill worn areas. / damaged baseboards have been removed in down stairs kitchen. Replace missing baseboards to seal present gaps in walls. / Reseal outlet cover to ceiling over service line where it has pulled away from drywall. / Multiple water stains in dry storage room ceiling. / Physical facilities shall be kept in good repair. // 6-501.12 Cleaning, Frequency and Restrictions - C Cleaning needed on floor under cooking equipment to remove grease and spilled french fries. / cleaning needed on wall by canned food to remove splash staining in dry storage. / Physical facilities shall be kept clean.



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✓
Spell



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Spell



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✓
Spell

